

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Check One: ☒ Initial ☐ Amendment (Explain) _____

Date Stamp RECEIVED CITY OF MOUNTAIN VIEW 04 JAN 20 A10:16	CALIFORNIA FORM 501 For Official Use Only
--	---

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) <u>SCHAAP STEPHANIE A</u>	DAYTIME TELEPHONE NUMBER <u>(650) 933 2627</u>	FAX NUMBER (optional) <u>()</u>	OFFICE OF <u>CITY CLERK</u>	E-MAIL (optional) <u>sas@alumni.brown.edu</u>
STREET ADDRESS <u>CITY COUNCIL</u>	CITY	STATE	ZIP CODE	
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:	
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: <u>MOUNTAIN VIEW</u> (Name of Jurisdiction)	<u>2004</u> (Year of Election)			

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

(Year of Election) <u>2004</u> Primary/general election	(Year of Election) _____ Special/runoff election
(Check one box)	
<input type="checkbox"/> I accept the voluntary expenditure ceiling for the election stated above.	
<input type="checkbox"/> I do not accept the voluntary expenditure ceiling for the election stated above.	
Amendment: <input type="radio"/> I did not exceed the expenditure ceiling in the primary or special election held on: _____ and I accept the voluntary expenditure ceiling for the general or special run-off election.	
(Mark if applicable) <input type="checkbox"/> On _____, I contributed personal funds in excess of the expenditure ceiling for the election stated above.	

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1/16/04
(month, day, year)

Signature Stephanie Schap
(Candidate)

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Check One: ☐ Initial ☒ Amendment (Explain) add street address

Date Stamp RECEIVED CITY OF MOUNTAIN VIEW 04 MAR 11 AM 11:48	CALIFORNIA FORM 501 For Official Use Only
--	---

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) <u>SCHAAF STEPHANIE A</u>	DAYTIME TELEPHONE NUMBER <u>(650) 933-2627</u>	FAX NUMBER (optional) <u>()</u>	E-MAIL (optional) <u>SAS@ALUMNI.BROWN.EDU</u>
STREET ADDRESS <u>MOUNTAIN VIEW</u>	CITY <u>CA</u>	STATE <u>94040</u>	ZIP CODE
OFFICE SOUGHT (POSITION TITLE) <u>CITY COUNCIL</u>	AGENCY NAME <u>CITY OF MOUNTAIN VIEW</u>	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: <u>CITY OF MOUNTAIN VIEW</u> (Name of Jurisdiction)	2004 (Year of Election)		

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

(Year of Election) <u>2004</u> Primary/general election	(Year of Election) <u>2004</u> Special/runoff election
(Check one box)	
<input type="checkbox"/> I accept the voluntary expenditure ceiling for the election stated above.	
<input type="checkbox"/> I do not accept the voluntary expenditure ceiling for the election stated above.	
Amendment: <input type="radio"/> I did not exceed the expenditure ceiling in the primary or special election held on: <u>3/9/2004</u> and I accept the voluntary expenditure ceiling for the general or special run-off election.	
(Mark if applicable) <input type="checkbox"/> On <u>3/9/2004</u> , I contributed personal funds in excess of the expenditure ceiling for the election stated above.	

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 3/9/2004
(month, day, year)

Signature Stephanie Schauf
(Candidate)